

While Gittell himself recognizes that he offers no new theory (p. 171), the discussion and analysis of chapter 8 begins to show how concepts and theories from new approaches to institutional analysis can be integrated into the study of urban politics. This I believe is the direction in which Gittell's contribution to the field will lie. Unfortunately, this book would have been much better if chapter 8 had taken the place of chapter 2 and if the analysis presented in chapters 3–7 was informed by the more rigorous theoretical statements that Gittell finally develops at the end of book. In other words, while Gittell went through a long process of "induction" to arrive at the theoretical insights with which he concludes his book, the book would have been much improved if Gittell had given us more quickly and more concisely the fruits of his long and careful analysis.

State University of New York,  
Stony Brook

MARK SCHNEIDER

**The Right To Die: Policy Innovation and Its Consequences.** By Henry R. Glick. New York: Columbia University Press, 1992. 238p. \$32.50.

From time to time, the pitiful plight of a hopelessly dying or vegetative patient dramatically calls attention to our vulnerability to a uselessly prolonged life. There was Karen Quinlan in the mid-1970s and Nancy Cruzan a decade later, both in seemingly endless comas and litigation; and there was fully paralyzed Elizabeth Bouvia, who had to go to court to keep from being force-fed forever. As modern medicine develops technology able to keep our bodies alive for months or even years, many wonder whether they can avoid such a fate. Is there a "right to die"? When the Quinlan, Cruzan, and other dramas fade, however, most people give little thought to the right to die: neither the prolongation of a terminal illness nor life as a vegetable make pleasant thinking.

Even those who want to think about the right to die as a public policy question cannot do so easily. The law of death is among the last areas of unfettered state policymaking. Meaningful federal intrusion, while perhaps inevitable, is not likely in the near future. A right to die exists to some degree in 48 states (if you plan to die in Michigan or Nebraska, hope that you go quickly); but no two states have quite the same policy. In some states, the right is very restricted; and even the most facilitative policies leave many situations uncovered.

In *The Right To Die*, Henry Glick gives us a comprehensive analysis of this emotional and increasingly visible issue. He does an excellent job. Glick records the issue's slow rise from political obscurity, noting that legislators' personal experiences served as the impetus for the first bills and enactments. California adopted a living-will law in 1976; but more often, such bills were defeated. Nonetheless, poll takers put the question on their surveys and began recording a rising and soon overwhelming sentiment in favor of a right to withdraw treatment. Legislation followed popular opinion in the next decade, with 23 states adopting right-to-die laws in 1984–86 alone. By 1991, legislation existed in 42 states (along with favorable judicial rulings in six others). But the adoption process did not always run smoothly: sponsors often had to compromise with state Catholic conferences, the primary opponent of right-to-die laws.

Glick looks at the policy's diffusion across the states,

finding that the standard socioeconomic and urbanism variables do not explain innovation. The key variables are percent Catholic (negative) and the number of relevant state court decisions. The cycles of mass media attention help explain the timing of adoptions. He is unsure that Quinlan's and others' plights directly led to adoptions, although they certainly had an indirect impact. Original right-to-die laws centered upon a living will, but more recent ones are usually centered on health-care proxy laws that allow the designation of another to act on behalf of an incompetent patient. Even now, however, because most states require advance medical directives, Glick estimates that 85% to 90% of us do not currently have a right to die.

Foremost, *The Right To Die* is a study in public policy. It is set in the agenda-building models of Roger Cobb and John Kingdon and in the diffusion-of-innovations hypotheses that a number of political scientists have developed over the last quarter-century. Glick's research is not driven by a particular theory or school of public policy. In fact, at the book's end, he is somewhat deficient in explaining how his findings contribute to a broader theoretical understanding of policymaking. However, Glick tells us about as much as we need to know concerning the right to die as a political issue. (Given his focus on policymaking, he offers only a minimal discussion of the ethical questions.) Because the right to die is a complex matter, this is not an easy accomplishment. There are several variants of the living will and health-care proxy approaches and even more definitions of *terminal illness*, *brain-dead*, and other key terms. The question whether the right to withhold or withdraw life support systems applies only to extraordinary medical techniques or includes hydration and food is quite controversial and often goes unaddressed in statutes. Various combinations of options, definitions, and interpretations make for a myriad of possible policies. Glick sorts them out without getting the reader bogged down in undue detail. I finished *The Right To Die* feeling that I understood the main practical and legal problems rather well.

While short on a theoretical wrap-up, *The Right To Die* is analytically rich. Unlike many policy studies, it pays attention to interactions between the branches, especially between the judiciary and legislature. (No governor has advanced a right-to-die proposal, although threatened or actual vetoes occasionally bring governors into the policymaking picture.) Lawmakers unmoved by right-to-die advocates may well respond when court decisions threaten to cut the legislature out of a policymaking role. State high courts will sometimes alter their policies in response to legislative enactments. Glick also realizes that a focus on diffusion patterns alone can miss more than it catches and takes pains to note how later adopters often "reinvented" more facilitative policies. (Thus, California now has one of the most restrictive laws while comparatively recent adopters like Maine and Montana have the most facilitative.) He examines the strategies of major lobbying groups, particularly right-to-die organizations, state Catholic conferences, and state medical associations. But in a nice touch, Glick also looks at those interests that *did not* lobby, particularly the AARP and other groups of the elderly. These groups are more focused on federal policies, especially benefits, and tend to shy away from the depressing aspects of aging and from issues that may divide their members.

Although Glick does not emphasize this, *The Right To Die* is a comprehensive, cross-state policy study. This in itself is a valuable contribution, because there are so few similar comparative studies in book-length form. There are, of course, a number of comparisons of political processes across the states; and though they are not as frequent as a generation ago, "data in, correlations out" journal articles still relate states' political, social, or economic characteristics to their policy choices. Also, there are case-study comparisons that focus even on a handful of states' policymaking or implementation processes. (Glick has mini-case studies of three states.) But the present book is really the first to combine all these approaches and, more, to compare how all the states have handled an important and rising policy issue.

*The Right to Die* is a "must" book for those interested in the question or in the broader issues of government regulation of health treatment and the rights of individuals to live autonomous lives. It is also a must for those interested in comparing agenda building, policy choices, and diffusion across the states. For these reasons, it will be on the shelves quite a while, to be replaced, perhaps, by a second edition in the next decade, when right-to-die policy is more fully developed.

University of Kentucky

BRADLEY C. CANON

**Hollow Mandates: American Public Opinion and the Conservative Shift.** By Howard J. Gold. Boulder: Westview, 1992. 214p. \$35.00.

It would be hard to imagine a more dramatic transformation in American politics than that which occurred between 1964 and 1984. There are probably few more telling illustrations of this change than the fortunes of Ronald Reagan, the era's central figure. In 1964, an electorally inexperienced Reagan went on national television and spoke forcefully in favor of the ill-fated campaign of conservative Barry Goldwater. In 1984, Reagan was busily putting many ideas espoused during the 1964 campaign into public policy and getting re-elected president in the process. Few would argue that politics of the 1980s had not changed from the 1960s; yet as striking as this turn right may seem, it is not as simple or enduring as some think. The nature and origins of this shift are the subject of Howard J. Gold's *Hollow Mandates*, a brief book well suited for advanced undergraduate or introductory graduate courses in public opinion or electoral politics.

As a backdrop for his analysis, Gold presents a useful summary of major changes in ideas, campaign rhetoric, and public policy that occurred in the 1960-80 era. Beginning with a sound, if brief, review of traditional and new conservative ideas that permeated this era, he considers if, when, and how these ideas came to infiltrate electoral politics by examining party nomination addresses and platforms. On the basis of a careful examination of nomination acceptance speeches and party platforms, he detects a fundamental shift to the right in the 1970s and early 1980s. Jimmy Carter's campaign of 1976 saw a major infusion of conservative ideas into Democratic campaign rhetoric. A shift rightward was also evident in the policy proposals (if not the candidate) of the Republican party that year. Gold makes a convincing case that Ronald Reagan's campaign of 1980 followed a conservative trend that had begun at

least four years earlier. And while Reagan did not initiate the trend, his election and subsequent reelection translated conservative words into action. *Hollow Mandates* presents a detailed litany of the changes wrought in federal policies during the Reagan years.

*Hollow Mandates* overriding concern is with a basic and important question: Has the transformation of politics and policy resulted from, or caused, a rightward shift in public opinion? He presents three "theories" to account for the change: (1) a "cultural backlash" against the Great Society programs and upheavals of the 1960s; (2) reactions to the "institutional malaise," scandals, and economic upheavals of the 1970s; and (3) a "sweeping mandate" interpretation emphasizing the role of Ronald Reagan's 1980 election. Each perspective predicts different periods of change in the electorate and suggests differing content for any accompanying attitudinal change.

Examining CPS and NORC survey data, Gold finds changes that are far less remarkable than one might expect. Remarkably, the only major ideological change was a growth in hostility toward federal power. Beside this and growing support for capital punishment in the 1972-88 period, white Americans in the 1980s were not remarkably more conservative than their counterparts in the 1960s. The most notable shift in public opinion was in perceptions of the managerial capabilities of the political parties. Increasingly, the Republican party became viewed as more effective managers, as Democrats suffered on this dimension. The conservative shift in America, Gold argues, was to a de facto conservatism resulting from a deepening public affection for the Republican party but not for its ideology.

According to Gold, America's turn right was a hollow mandate (hence the title). The shift was limited to a managerial conservatism lacking explicit ideology. As long as the Republicans could manage the government (and particularly the economy) effectively, the public would support them and tolerate their conservative social pronouncements. Unfortunately for the Republicans, the publication of *Hollow Mandates* came too late to stop Bush from displaying the truth of many penetrating insights offered in the book.

The main faults I find with *Hollow Mandates* are with its rather simplistic research design and methodology and a greatly circumscribed theoretical focus. With only minor exceptions, public opinion is not broken down into subgroups. The sometimes sparse analysis would have been greatly enhanced with attention to geographical, gender, ethnic, racial, and other differences (if any) in public opinion about issues and parties over time. Added to this, with a minor exception in chapter 8, multivariate analysis is sadly lacking. At many important junctures, more sophisticated modeling could have allowed concise evaluation of the explanatory usefulness of the alternative "theories" of change and the examination of generational replacement presented in chapter 7. The "theories," furthermore, are nothing more than descriptions of historical events and, as such, provide little that is generalizable about the forces that may promote change in American politics. In this vein, Gold also does not attempt to push his findings to a general statement of the nature of public opinion in America like that offered in more general studies such as McClosky and Zaller's *American Ethos* (1984). This is unfortunate, because his findings point to important contradictions in the electorate that color so much of the American political landscape.